

Lincoln Police Department  
Thomas K. Casady, Chief of Police  
575 South 10th Street  
Lincoln, Nebraska 68508

402-441-7204  
fax: 402-441-8492



MAYOR COLEEN J. SENG

lincoln.ne.gov

September 20, 2006

Mayor Seng and City Council  
City of Lincoln  
City County Building  
Lincoln, NE

Mayor Seng and Members of the City Council:

An investigation has been made regarding the application of Coyote Willy's, 2137 Cornhusker Highway requesting a class C liquor license.

This location has been purchased by David Miller and Stacy Combs.

David Miller has requested that he be approved as the manager of the liquor license.

Background information on the applicant is as follows:

David Miller was born in Kansas City, Kansas. He attended the University of Kansas graduating in 1993.

David Miller employment history is as follows:

|                |                            |                 |
|----------------|----------------------------|-----------------|
| 2000 - Present | Self Employed              |                 |
| 1998 - 2000    | Sales, Stewart Enterprises | Omaha, NE.      |
| 1996 - 1998    | Sales, Highland Park       | Kansas City, KS |

Stockholder information has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.

  
THOMAS K. CASADY, Chief of Police



A nationally accredited law enforcement agency



Liquor License Business Report

Completed by Inv. Fosler #843

Business Name: Coyote Willy's

Address : 2137 Cornhusker Phone: \_\_\_\_\_

Type of Investigation : Purchase Upgrade Expansion New  
Owner Manager Other: \_\_\_\_\_

Type of Business: BAR

Liquor Class A B (C) D I J K Catering Other: \_\_\_\_\_

Ownership: Corporation Partnership Individual

Amount Financed: NONE Source: \_\_\_\_\_

Lease Agreement: 3yr @ 4800<sup>00</sup>+

Sales: %Food: NA %Liquor: 100

Located: Commercial Industrial Residential

Traffic Flow: Heavy Off Street Parking: Yes No

Ready for Operation: Yes No/ Est Date: \_\_\_\_\_

Food Service: Yes No Employees: F/T 0 P/T 15-16

Est Seating: 890 Est Daily Customers 400

Hours of Operation: 7pm - 1am Thu - SAT

Any Additional Comments: \_\_\_\_\_

Liquor License Investigation

Business (DBA) Coyote Willy's

☒ Manager ☒ Owner Other \_\_\_\_\_

Name: David Miller

US Citizen ? ☒ Yes No

Has applicant ever been cited for liquor law violations ? ☒ No Yes  
Explain \_\_\_\_\_

Does applicant have an interest in another liquor license ? ☒ No Yes  
Explain \_\_\_\_\_

Is spouse qualified to hold a license ? Yes No ☒ N/A

How is applicant if not an owner to be paid ? Salary Hourly

How many hours will applicant be at the establishment ? 30 +

Any other employment ? No ☒ Yes, explain Several other businesses

Any previous experience with a liquor license? ☒ Yes No

Any criminal convictions ? ☒ No Yes

Comments \_\_\_\_\_

Is applicant a property owner in Lincoln ? ☒ Yes No

Is applicant involved in any civil litigation ? ☒ No Yes

Comments \_\_\_\_\_

☒ Photo ☒ Records Check ☒ References

Comments \_\_\_\_\_

Interview Date 9 / 20 / 06



FILED

10/9/06

## STATE OF NEBRASKA

Dave Heineman  
Governor

SEP 12 2006

CITY CLERK'S OFFICE  
LINCOLN, NEBRASKA

September 8, 2006

NEBRASKA LIQUOR CONTROL COMMISSION

Hobert B. Rupe

Executive Director

301 Centennial Mall South, 5th Floor

P.O. Box 95046

Lincoln, Nebraska 68509-5046

Phone (402) 471-2571

Fax (402) 471-2814

TRS USER 800 833-7352 (TTY)

web address: <http://www.lcc.ne.gov/>

City Clerk of Lincoln  
City/County Building  
555 S 10 Street  
Lincoln, NE 68508

*Lead Dog Entertainment Inc  
dba Cogote Willy's, 2137 Cornhusker Hwy, Ste A  
Class C*

Dear Local Governing Body:

Attached is the form to be used on all retail liquor license applications. Local clerks must collect proper license fees and occupation tax per ordinance, if any, before delivering the license at time of issuance.

TWO KEY TIME FRAMES TO KEEP IN MIND ARE:

- 1) Publicize one time not less than 7 days not more than 14 days prior to date of hearing.
- 2) You have 45 days to conduct a hearing after the date of receipt of the notice from this Commission (§53-134). You may choose **NOT** to make a recommendation of approval or denial to our Commission.

PER §53-133, THE LIQUOR CONTROL COMMISSION SHALL SET FOR HEARING ANY APPLICATION WHEREIN:

- 1) There is a recommendation of denial from the local governing body,
- 2) A citizens protest; or
- 3) Statutory problems that the Commission discovers.

PLEASE NOTE A LICENSEE MUST BE "PROPERLY" LICENSED IN ORDER TO PURCHASE FROM WHOLESALERS, AND A LICENSE IS EFFECTIVE:

- 1) Upon payment of the license fees;
- 2) Physical possession of the license;
- 3) Effective date on the license.

A6-0 99632

123

1B

Sincerely,

*Jackie B Matulka*

NEBRASKA LIQUOR CONTROL COMMISSION  
Jackie B. Matulka  
Licensing Division

Enclosures  
Rhonda R. Flower  
Commissioner

Bob Logsdon  
Chairman

R.L. (Dick) Coyne  
Commissioner

An Equal Opportunity/Affirmative Action Employer

Printed with soy ink on recycled paper

CJIS 700 440

FORM 35-4001  
REV. 12/99

RECEIVED

## LICENSE APPLICATION CHECKLIST

Applicant Name Lead Dog Entertainment, Inc.Telephone # (402) 486-3454Trade Name Coyote Willy'sPrevious Trade Name N/AAUG 8 0 2006  
NEBRASKA LIQUOR  
CONTROL COMMISSION

Provide all the items requested. Failure to provide any item will cause this application to be returned or placed on hold. All documents must be legible. Any false statement or omission may result in the denial, suspension, cancellation or revocation of your license. Your operation depends on receiving a liquor license the Nebraska Liquor Commission cautions you that if you purchase, remodel, start construction, spend or commit money that you do so at your own risk. Prior to submitting your application review the application carefully to ensure that all sections are complete, and that any omissions or errors have not been made. All applications & attachments must be submitted in triplicate. You may want to check with the city/village or county clerk, where you are making application, to see if any additional local requirements must be met before submitting application to the state.

REQUIRED ATTACHMENTS

EACH ITEM MUST BE CHECKED OFF AND INCLUDED OR MARKED N/A FOR NOT APPLICABLE

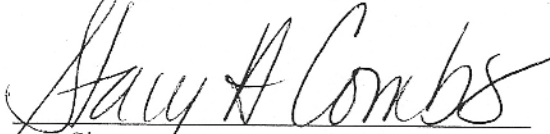
- ☒ 1. Fingerprint cards for each person (two cards per person) must be enclosed with a separate check payable to the Nebraska State Patrol for processing in the amount of \$38.00 for each person. All areas must be completed on cards as per brochure. To prevent the delay in issuing your license, we strongly suggest you go to a Nebraska State Patrol Agency or law enforcement agency listed in the fingerprint brochure.
- ☒ 2. Enclose registration and license fees for the appropriate class of license, made out to the Nebraska Liquor Control Commission.
- ☒ 3. Enclose the appropriate additional application forms; Individual License - Form 1; Partnership License - Form 2; Corporate LLC License - Form 3a and Manager application - Form 3b(with corporate application only). LLC application must include all members.
- ☒ 4. If building is being leased send a copy of the lease. Be sure it is in the individual(s) or corporate name being applied for. Also, the lease must extend through the license year being applied for. If building is owned, send a copy of the deed or purchase agreement in the appropriate name.
- ☒ 5. If you are buying the business of a current licensee, provide a copy of the purchase agreement from licensee. This also needs to be in applicant's name.
- ☒ 6. Enclose a copy of the temporary agency agreement, if applicable. Must be on Commission form only. Include a copy of the signature card from the bank showing both the sellers and buyers name(s) on account.
- ☒ 7. Copy of alcohol inventory being purchased. Inventory shall include brand names and container sizes. Inventory may be taken at the time application is being submitted.
- ☒ 8. Enclose a list of any inventory or property owned by other parties that are on the premise.
- ☒ 9. For individual and partnership applications enclose proof of citizenship birth certificates, or naturalization documents for all persons listed on application. Documents must be a certificate from the State, where born, not hospital certificate.

QA  
Bus 6649  
45-mm  
OPT. 280750

- ☒ 10. If a corporation enclose a copy of the articles of incorporation. This document must show receipt (barcode) by the Secretary of States Office.

Mail checklist, all applications and attachments to: Nebraska Liquor Control Commission, 301 Centennial Mall South,  
PO Box 95046, Lincoln NE 68509-5046

I acknowledge that this application is not a guarantee that a liquor license will be issued to me, and that the average processing period is 45-60 days. Furthermore, I understand that all the information is truthful and I accept all responsibility for any false documents.



Signature  
President of Lead Dog Entertainment, Inc.

# RECEIVED

AUG 30 2008

## APPLICATION FOR LIQUOR LICENSE

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: www.lcc.ne.gov

NEBRASKA LIQUOR  
CONTROL COMMISSION

OFFICE USE ONLY

### CLASS OF LICENSE FOR WHICH APPLICATION IS MADE AND FEES CHECK DESIRED CLASS(S)

#### RETAIL LICENSE(S)

- |                                     |   |   |         |
|-------------------------------------|---|---|---------|
| <input type="checkbox"/>            | A | Beer, On Sale Only                            | \$45.00 |
| <input type="checkbox"/>            | B | Beer, Off Sale Only                           | \$45.00 |
| <input checked="" type="checkbox"/> | C | Beer, Wine & Distilled Spirits, On & Off Sale | \$45.00 |
| <input type="checkbox"/>            | D | Beer, Wine & Distilled Spirits, Off Sale Only | \$45.00 |
| <input type="checkbox"/>            | I | Beer, Wine & Distilled Spirits, On Sale Only  | \$45.00 |

Class K Catering license may be added to any of these classes with an additional fee of \$100.00 and filing form 35-4202

#### MISCELLANEOUS

- |                          |   |  | Bond                 |
|--------------------------|---|--|----------------------|
| <input type="checkbox"/> | L | Craft Brewery (Brew Pub)   | \$295.00 1,000 min.  |
| <input type="checkbox"/> | O | Boat   | \$ 95.00 N/A         |
| <input type="checkbox"/> | V | Manufacturer, Beer, Wine & Distilled Spirits<br>(additional fee of \$100 to \$1,000-call for exact amount) | \$ 45.00 10,000 min. |
| <input type="checkbox"/> | W | Wholesale Beer   | \$545.00 5,000 min.  |
| <input type="checkbox"/> | X | Wholesale Liquor   | \$795.00 5,000 min.  |
| <input type="checkbox"/> | Y | Farm Winery  | \$295.00 1,000 min.  |

All Class C licenses expire October 31st

All other licenses expire April 30<sup>th</sup>

Catering expire same as underlying retail license

#### TYPE OF APPLICATION BEING APPLIED FOR (CHECK ONE)

- ☐ Individual License, requires insert form 1
- ☐ Partnership License, requires insert form 2
- ☒ Corporate License, requires insert form 3a and manager application 3b

#### NAME OF PERSON OR FIRM ASSISTING WITH APPLICATION

(Commission will call this person with any questions we may have)

Name: Misty M. Cowan, Paralegal

Phone: (402) 475-5100

Firm Name: Rembolt Ludtke LLP

Firm address: 1201 Lincoln Mall, Suite 102, Lincoln, NE 68508

**PREMISE INFORMATION**

Trade Name (doing business as) Coyote Willy's

Street Address #1 2137 Cornhusker Highway, Suite A

Street Address #2 \_\_\_\_\_

City Lincoln

County Lancaster #2

Zip Code 68521

Telephone number at premise to be licensed (402) 474-9459

Is this location inside the city/village corporate limits

☒ YES

☐ NO

Mail to Address (where you want receipt of Liquor Control Commission mailings)

Name: ~~Misty M. Gowan, Paralegal~~

Stacy A. Combs President  
Lead Dog Entertainment, Inc.

Street Address #1 1201 Lincoln Mall, Suite 102

6100 S. 58th St., Suite E

Street Address #2 \_\_\_\_\_

City Lincoln

County Lancaster

Zip Code 68501

**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED**

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building in situations. No blue prints please. Be sure to indicate the direction north and number of floors of the building.

SEE ATTACHED



## APPLICANT INFORMATION

### 1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

- ☒ Yes If yes, please explain below or attach a separate page.  
☐ No

Stacy Ann Combs - minor traffic violations  
David Brian Miller - minor traffic violations

*non  
alcohol  
related*

2. Are you buying the business and/or assets of a licensee? If yes, submit a copy of the sales agreement with a listing of assets being acquired including liquor inventory (name brand and container size required). Liquor Inventory may be taken at time of application being submitted.

- ☒ Yes  
Current business name and license number Coyote Willy, No. C-44472  
☐ No

3. Are you filing a temporary agency agreement, Commission form 4231, whereby current licensee allows you to operate on their license. If yes, attach agreement. **Please note:** This agreement is not effective until Commissions assigns you a 3-digit ID number.

- ☒ Yes  
☐ No

*44472*

4. Are you borrowing any money from any source to establish and/or operate the business? If yes, list the lender.

- ☐ Yes  
☒ No

5. Will any person or entity other than applicant be entitled to a share of the profits of this business? If yes, explain. All involved members must be disclosed on application.

☐

Yes

☒

No

6. Will any of the furniture, fixtures and equipment to be used in this business be owned by others? If yes, list such items and the owner.

☐

Yes

☒

No

7. Will any person(s) other than named in this application have any direct or indirect ownership or control of the business? If yes, explain? (No silent partners)

☐

Yes

☒

No

8. Are the premises to be licensed within 150 ft of a church, school, hospital, home for the aged or indigent persons or for veterans, their wives, children, or within 300 ft of a college or university campus? If yes, list the name of such institution and where it is located in relation to the premises. Neb. Rev. Stat. 53-177.

☐

Yes

☒

No

9. Is anyone listed on this application a law enforcement officer? If yes, list the person, the law enforcement agency involved and the person's exact duties.

☐

Yes

☒

No

10. List the primary bank and/or financial institution (branch if applicable) to be utilized by the business and the individual(s) who will be authorized to write checks and/or make withdrawals on accounts at the institutions.

Pinnacle Bank - 27th & Folkways, Lincoln, NE

Stacy Ann Combs and David Brian Miller are authorized to write checks/make withdrawals

11. List all past and present liquor licenses held in Nebraska or any other state by any person named in this application. Include license holder name, location of license and license number. Also list reasons for termination of any licenses previously held.

None

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NEBRASKA LIQUOR  
CONTROL COMMISSION

12. List the person who will be the on site supervisor of the business and the estimated number of hours per week such person or manager will be on the premises supervising operations.

David Brian Miller - 20 to 30 hours per week

13. List the training or experience (when and where) of the person listed in #12 above in connection with selling and/or serving alcohol products.

Worked as bartender at various bars while attending college in Kansas.

Approximately 15 hours per week for approximately 3-4 years. Also worked as bouncer (same hours and time-frame). Currently scheduled to take hospitality class in Jan. 2007 (first time available).

14. If the property for which this license is sought is owned, submit a copy of the deed, or proof of ownership. If leased, submit a copy of the lease covering the entire license year. Documents must show title or lease held in name of applicant as owner or lessee in the individual(s) or corporate name for which the application is being filed.

☒ Lease: expiration date July 31, 2009

☐ Deed

☐ Purchase Agreement

15. When do you intend to open for business? August 15, 2006

16. What will be the main nature of business? What are the anticipated hours of operation?

Bar, live entertainment, dancing, and pool tables. Open from 7pm to 1 am TH thru Sat.

17. List the principal residence(s) for the past 10 years for all persons required to sign application, including spouses. If necessary attach a separate sheet.

| Applicant Name     | From: Year | To: Year | City/State      |
|--------------------|------------|----------|-----------------|
| Stacy Ann Combs    | 2000       | present  | Lincoln, NE     |
|                    | 1998       | 2000     | Omaha, NE       |
|                    | 1997       | 1998     | Kansas City, KS |
|                    | 1996       | 1997     | Topeka, KS      |
| David Brian Miller | 2000       | present  | Lincoln, NE     |
|                    | 1998       | 2000     | Omaha, NE       |
|                    | 1997       | 1998     | Kansas City, KS |

1996 1997 Topeka, KS

The undersigned applicant(s) hereby consent(s) to a background investigation and release present & future records of every kind and description including police records, tax records (State and Federal), bank or lending institution records, and said applicant(s) and spouse(s) waive(s) any right or causes of action that said applicant(s) or spouse(s) may have against the Nebraska Liquor Control Commission, the Nebraska State Patrol, and any other individual disclosing or releasing said information. Any documents or records for the proposed business or for any partner or stockholder that are needed in furtherance

of the application investigation or any other investigation shall be supplied immediately upon demand to the Nebraska Liquor Control Commission or the Nebraska State Patrol. The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate or fraudulent.

Individual applicants agree to supervise in person the management and operation of the business and that they will operate the business authorized by the license for themselves and not as an agent for any other person or entity. Corporate applicants agree the approved manager will superintend in person the management and operation of the business. Partnership applicants agree one partner shall superintend the management and operation of the business. All applicants agree to operate the licensed business within all applicable laws, rules, regulations, and ordinances and to cooperate fully with any authorized agent of the Nebraska Liquor Control Commission.

Must be signed in the presence of a notary public by applicant(s) and spouse(s). If partnership or LLC (Limited Liability Company), all partners, members and spouses must sign. If corporation all officers, directors, stockholders (holding over 25% of stock) and spouses. Full birthnames only, no initials.

✓ Hay A Combs (sign here) Don B. Smith (sign here)  
President of Lead Dog Entertainment, Inc. Secretary/Treasurer  
of Lead Dog Entertainment, Inc.

(sign here) (sign here)

(sign here) (sign here)

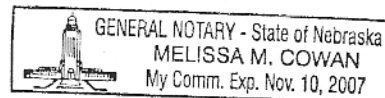
(sign here) (sign here)

(sign here) (sign here)

Subscribed in my presence and sworn to before me this

24th day of August, 2006

Melissa M. Cowan  
Notary Public Signature & Seal



In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.

FORM 35-4010  
REV. 4/05

TEMPORARY AGENCY AGREEMENT

ID# \_\_\_\_\_

1. On August 15, 2006, Seller and Buyer entered into a contract for sale of the business known as Coyote Willy's, which contract is contingent upon Buyer receiving approval for a liquor license to operate the business.
2. Seller and Buyer agree to allow Buyer to operate the business, subject to approval by the Liquor Control Commission, for a period not to exceed 120 days subsequent to August 30, 2006, the date of filing the application with the Liquor Control Commission.
3. Seller will maintain a possessory interest in the property in the form of a lease, use permit or license;
4. Buyer will at all times be the agent of the Seller, but Buyer will be completely and totally responsible for the operation of the business and for all liability associated with the operation of the business during the time when Buyer is acting as Seller's agent; it is specifically understood that Seller shall have no liability for the operation of the business during this period of time, and Buyer agrees to indemnify and hold Seller harmless from any claims arising during this period of operation; however, it is understood that the liquor license remains in the name of the Seller and Seller will be responsible for all violations of the liquor laws of the State of Nebraska until such time as Seller's license is canceled;
5. At time of closing, certain funds will be held in escrow pending issuance of the license.

6. Financial Institution: Name, Address, Account number of where escrow account is being held - Send Copy Of Signature Card.

Pinnacle Bank  
2703 Folkways Blvd.  
Lincoln, NE 68521

Acct. No. 2300296897

7. All profits derived from the operation of the business by the buyer, after payment of bills and salaries, shall be paid to the same escrow agent to be held until the issuance of the license, it being specifically understood that the Buyer shall receive no profits from the operation of the business until the liquor license has been issued to Buyer, but shall have the right to direct the investment of profit funds by escrow agent.
8. This agreement constitutes the entire and complete understanding of all parties with regard to the agency relationship, and is binding upon the heirs, personal representatives and successors of the parties.
9. It is hereby understood that in the event the Commission denies this application, this Temporary Agency Agreement is null and void the date of the order.

Signature of Seller Bonnie Charlesworth  
President of BCRT, Inc.

Signature of Seller \_\_\_\_\_

Signature of Buyer Stacy A Combs

Signature of Buyer \_\_\_\_\_  
President of Lead Dog Entertainment, Inc.

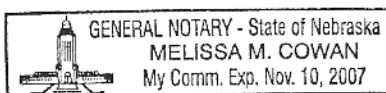
Dated this 24th day of August, 2006

STATE OF NEBRASKA )  
COUNTY OF Lancaster )<sup>SS</sup>

The above and foregoing Agency Agreement was acknowledged before me this 24th day of August, 2006,  
by Stacy A. Combs, as Seller, \_\_\_\_\_, as Seller.

The above and foregoing Agency Agreement was acknowledged before me this 24th day of August, 2006,  
by Bonnie Charlesworth, as Buyer, \_\_\_\_\_, as Buyer.

Signature & Seal of Notary Public Melissa M. Cowan



PINNACLE BANK  
2703 FOLKWAYS BLVD  
LINCOLN NE 68521-1170

**OWNERSHIP OF ACCOUNT - PERSONAL (Select One and Initial):**

- ☐ Single-Party Account ☐ Trust-Separate Agreement  
☐ Multiple-Party Account  
☐ Other

**RIGHTS AT DEATH (Select One And Initial):**

- ☐ Single-Party Account  
☐ Multiple-Party Account With Right of Survivorship  
☐ Multiple-Party Account Without Right of Survivorship  
☐ Single-Party Account With Pay On Death  
☐ Multiple-Party Account With Right of Survivorship and Pay On Death

PAY-ON-DEATH BENEFICIARIES: To Add Pay-On-Death Beneficiaries Name One or More:

**OWNERSHIP OF ACCOUNT - BUSINESS PURPOSE**

- ☐ SOLE PROPRIETORSHIP ☐ PARTNERSHIP  
☒ CORPORATION: ☐ FOR PROFIT ☐ NOT FOR PROFIT  
☐ LIMITED LIABILITY COMPANY

BUSINESS:

COUNTY & STATE  
OF ORGANIZATION:

AUTHORIZATION DATED:

DATE OPENED 08/28/2006 BY NGA VU

INITIAL DEPOSIT \$

☐ CASH ☐ CHECK ☐

HOME TELEPHONE #

BUSINESS PHONE #

DRIVER'S LICENSE #

E-MAIL

EMPLOYER

MOTHER'S MAIDEN NAME

Name and address of someone who will always know your location:

**BACKUP WITHHOLDING CERTIFICATIONS**

TIN: 20-5353058

☒ **TAXPAYER I.D. NUMBER** - The Taxpayer Identification Number shown above (TIN) is my correct taxpayer identification number.

☒ **BAC KUP WITHHOLDING** - I am not subject to backup withholding either because I have not been notified that I am subject to backup withholding as a result of a failure to report all interest or dividends, or the Internal Revenue Service has notified me that I am no longer subject to backup withholding.

☐ **EXEMPT RECIPIENTS** - I am an exempt recipient under the Internal Revenue Service Regulations.

**SIGNATURE:** I certify under penalties of perjury the statements checked in this section and that I am a U.S. person (including a U.S. resident alien).

Stacy A Combs 8-28-06  
LEAD DOG ENTERTAINMENT, INC (Date)

ACCOUNT NUMBER  
2300296897

PORTFOLIO NUMBER  
214205

**ACCOUNT OWNER(S) NAME & ADDRESS**

LEAD DOG ENTERTAINMENT, INC  
BCRT INC

DBA COYOTE WILLY'S  
6100 S 58TH ST STE E  
LINCOLN NE 68516-3665

**TYPE OF ACCOUNT**

- ☐ NEW ☒ EXISTING  
☒ CHECKING ☐ SAVINGS  
☐ MONEY MARKET ☐ CERTIFICATE OF DEPOSIT  
☐ NOW ☐

Account Name: PinnCheck Commercial

☐ This is a Temporary account agreement.

Number of signatures required for withdrawal 1

FACSIMILE SIGNATURE(S) ALLOWED? ☐ YES ☒ NO

[X]

**SIGNATURE(S)** - The undersigned agree to the terms stated on every page of this form and acknowledge receipt of a completed copy. The undersigned further authorize the financial institution to verify credit and employment history and/or have a credit reporting agency prepare a credit report on the undersigned, as individuals. The undersigned also acknowledge the receipt of a copy and agree to the terms of the following disclosure(s):

- ☐ Deposit Account ☒ Funds Availability ☒ Truth in Savings  
☒ Electronic Fund Transfers ☐ Privacy ☐ Substitute Checks  
☐

(1):

[X] Stacy A Combs  
STACY A COMBS

I.D. #

D.O.B.

(2):

[X] David B Miller  
DAVID B MILLER

I.D. #

D.O.B.

(3):

[X] Bonnie Charlesworth  
BONNIE CHARLESWORTH

I.D. #

D.O.B.

(4):

[X]

I.D. #

D.O.B.

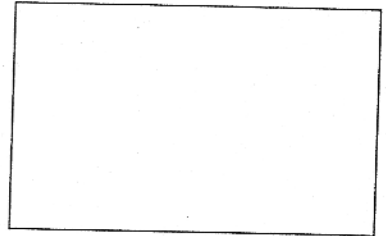
**AGENCY (POWER OF ATTORNEY) DESIGNATION (Optional):** To Add Agency Designation To Account, Name One or More Agents:

(Select One and Initial):

- ☐ Agency Designation Survives Disability or Incapacity of Parties  
☐ Agency Designation Terminates on Disability or Incapacity of Parties

**APPLICATION FOR LIQUOR LICENSE  
CORPORATION MANAGER - FORM 3b  
\*MUST BE A NEBRASKA RESIDENT\***

301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: <http://www.lcc.ne.gov/>



**LIQUOR LICENSE INFORMATION**

NAME OF LICENSED CORPORATION Lead Dog Entertainment, Inc.

CLASS & LICENSE NUMBER to be assigned

TRADE NAME Coyote Willy's

STREET ADDRESS 2137 Cornhusker Highway, Suite A CITY Lincoln

*Stay A Combs* President of Lead Dog Entertainment, Inc.  
**SIGNATURE OF CORPORATION PRESIDENT/CEO**

**APPLICANT INFORMATION (MUST BE 21 OR OVER AND NEBRASKA RESIDENT)**

NAME David Brian Miller

ADDRESS 3010 Loveland Dr.

CITY Lincoln STATE NE ZIP CODE 68502

HOME PHONE NUMBER (402) 483-5254 BUSINESS PHONE NUMBER (402) 486-3454

SEX ☒ MALE ☐ FEMALE

SOCIAL SECURITY NUMBER \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH Kansas City, KS

DRIVERS LICENSE NUMBER & STATE \_\_\_\_\_

**SPOUSES INFORMATION (IF NOT MARRIED INDICATE)**

SPOUSE NAME N/A

SOCIAL SECURITY NUMBER \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

DRIVERS LICENSE NUMBER & STATE \_\_\_\_\_

1. **READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.**

Has anyone who is a party to this application, or their spouse, **EVER** been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☒ YES ☐ NO

If yes, please explain below or attach a separate page.

David Brian Miller - minor traffic violations

*non  
alcohol  
related*

2. Have you or your spouse ever made application for any liquor license or manager for any liquor license? **IF YES**, for what premise give license number and date.

☐ YES ☒ NO

3. Have you or your spouse ever made a compromise settlement for violation of such laws?

☐ YES ☒ NO

4. Do you, as a manager, have all the qualifications required by any person entitled to hold a Nebraska Liquor License? Nebraska Liquor Control Act (§53-131.01)

☒ YES ☐ NO

5. Have you filed fingerprint cards and **PROPER FEES** (if check, make out to the NE State Patrol), with this application?

☒ YES ☐ NO

*fprints submitted*

**RESIDENCES FOR THE PAST 10 YEARS, APPLICANT AND SPOUSE MUST COMPLETE**

| APPLICANT: CITY & STATE         | YEAR<br>FROM TO |         | SPOUSE: CITY & STATE | YEAR<br>FROM TO |  |
|---------------------------------|-----------------|---------|----------------------|-----------------|--|
| David Brian Miller, Lincoln, NE | 2000            | present | N/A                  |                 |  |
| Omaha, NE                       | 1998            | 2000    |                      |                 |  |
| Kansas City, KS                 | 1997            | 1998    |                      |                 |  |
| Topeka, KS                      | 1996            | 1997    |                      |                 |  |

**EMPLOYERS - LIST LAST TWO EMPLOYERS**

| MONTH/YEAR<br>FROM TO |         | NAME OF EMPLOYER | NAME OF SUPERVISOR | TELEPHONE NUMBER |
|-----------------------|---------|------------------|--------------------|------------------|
| 06/00                 | present | Self-employed    | David Miller       | (402) 486-3454   |
|                       |         |                  |                    |                  |



**PERSONAL OATH AND CONSENT OF INVESTIGATION  
MUST BE SIGNED BY APPLICANT & SPOUSE**

The above individual(s), being first duly sworn upon oath, deposes and states that the undersigned is the applicant and/or spouse of applicant who makes the above and foregoing application, that said application has been read and that the contents thereof and all statements contained therein are true. If any false statement is made in any part of this application, the applicant(s) shall be deemed guilty of perjury and subject to penalties provided by law. (Sec. §53-131.01) Nebraska Liquor Control Act.

The undersigned applicant hereby consents to an investigation of his/her background including all records of every kind and description including police records, tax records (State and Federal), and bank or lending institution records, and said applicant and spouse waive any rights or causes of action that said applicant or spouse may have against the Nebraska Liquor Control Commission and any other individual disclosing or releasing said information to the Nebraska Liquor Control Commission. If spouse has **NO** interest directly or indirectly, an affidavit of non participation may be attached.

The undersigned understand and acknowledge that any license issued, based on the information submitted in this application, is subject to cancellation if the information contained herein is incomplete, inaccurate, or fraudulent.

✓ *Dan B. Smith*

Signature of Applicant

Secretary/Treasurer of Lead Dog Entertainment, Inc.

*[Signature]*  
Signature of Spouse

Subscribed in my presence and sworn to before me this 24th  
day of August, 2006

Subscribed in my presence and sworn to before me this \_\_\_\_\_  
day of \_\_\_\_\_

*Melissa M. Cowan*

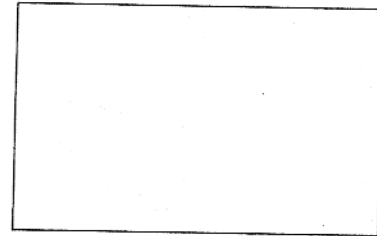
Notary Signature & Seal

*[Signature]*  
Notary Signature & Seal



**APPLICATION FOR LIQUOR LICENSE  
CORPORATION/LLC INSERT - FORM 3a**

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: <http://www.lcc.ne.gov/>



Name of Corporation or Limited Liability Company that will hold license. Attach copy of Articles of Incorporation. (Document must show [barcode] receipt by Secretary of States Office.

Lead Dog Entertainment, Inc.

Corporate Street Address: 6100 S. 58th Street, Suite E

City: Lincoln State: NE Zip Code: 68516

Corporate Telephone Number (402) 486-3454

Total number of shares issued (if corporation) 1,000

Is this a Non Profit Corporation? ☐ YES ☒ NO  
If yes, what is your Federal ID #?

Name of Registered Agent Joseph C. Byam

Name of Proposed Manager David Brian Miller  
This person must complete form 35-4013

List name of Chief Executive Officer

Last Name: Combs First Name: Stacy MI Ann

Address Street 6100 S. 58th Street, Suite E City Lincoln

State NE Zip Code 68516 Home Phone number (402) 483-5254

Social Security Number Date of Birth

List names of all Officers, Directors, Stockholders, Members and their Spouses

Last Name Combs First Name Stacy

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Title President Number of Shares 500

Spouse Name (indicate N/A if single) N/A

Spouse Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Title \_\_\_\_\_ Number of Shares \_\_\_\_\_

Last Name Miller First Name David Brian

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Title Secretary/Treasurer Number of Shares 500

Spouse Name (indicate N/A if single) N/A

Spouse Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Title \_\_\_\_\_ Number of Shares \_\_\_\_\_

Last Name \_\_\_\_\_ First Name \_\_\_\_\_

Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Title \_\_\_\_\_ Number of Shares \_\_\_\_\_

Spouse Name (indicate N/A if single) \_\_\_\_\_

Spouse Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Title \_\_\_\_\_ Number of Shares \_\_\_\_\_

✓ Is this Corporation or Limited Liability Company controlled by another Corporation?

☐ Yes ☒ No

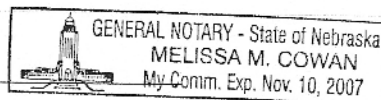
If yes, give name of corporation and supply organizational chart

✓ Indicate tax year with the IRS

Starting Date ~~08/15/2006~~ <sup>SAC 8-24-06</sup> 01/01/2006 Ending Date ~~08/14/2007~~ <sup>SAC 8-24-06</sup> 12/31/2006

✓ *Gay A Combs*  
Signature of President/Managing Member  
President of Lead Dog Entertainment, Inc.

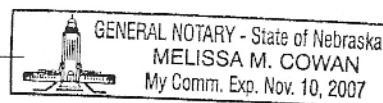
*Melissa M. Cowan*  
Notary Public Signature & Seal



Subscribed in my presence and sworn to before me this

24<sup>th</sup> day of August, 2006

*Melissa M. Cowan*  
Notary Public Signature & Seal



In compliance with the ADA, this application for license form is available in other formats for persons with disabilities. A ten day advance period is requested in writing to produce the alternate format.